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<b>SERIAL NUMBER</b> 09/835,933	<b>FILING OR 371(c) DATE</b> 04/16/2001 <b>RULE</b>	<b>CLASS</b> 383	<b>GROUP ART UNIT</b> 3781	<b>ATTORNEY DOCKET NO.</b> 81.010
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

None *AB*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None *AB*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

06/08/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 31	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>AB</i>				

## ADDRESS

23598

## TITLE

COMPOSITE BREATHABLE PRODUCE BAG WITH A REINFORCED MESH SIDEWALL

<b>FILING FEE RECEIVED</b> 574	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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